

# TRANSMITTAL FORM

Application Serial Number	09/086,821
Filing Date	May 29, 1998
First Named Inventor	Lara
Group Art Unit	2764
Examiner Name	Not Yet Assigned
Attorney Docket No.	ATV-004

## ENCLOSURES (check all that apply)

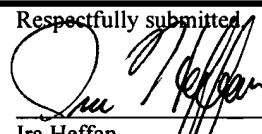
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Check Attached <input type="checkbox"/> Copy of Fee Transmittal Form <input type="checkbox"/> Amendment/Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____] <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Form PTO-1449 <input type="checkbox"/> Copies of IDS Citations <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application	<input checked="" type="checkbox"/> Copy of Notice to File Missing Parts of Application (PTO-1553) <input type="checkbox"/> Formal Drawing(s) <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> To Convert to a Provisional Application <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers) <input type="checkbox"/> Terminal Disclaimer <input checked="" type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund <input type="checkbox"/> After Allowance Communication to Group	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Return Receipt Postcard <input checked="" type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8 <input type="checkbox"/> Additional Enclosure(s) (please identify below)
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## CORRESPONDENCE ADDRESS

Direct all correspondence to: Patent Administrator  
Testa, Hurwitz & Thibault, LLP  
High Street Tower  
125 High Street  
Boston, MA 02110  
Tel. No.: (617) 248-7000  
Fax No.: (617) 248-7100

## SIGNATURE BLOCK

Date: July 8, 1998  
Reg. No. 41,059  
Tel. No.: (617) 248-7176  
Fax No.: (617) 248-7100

Respectfully submitted,  
  
Ira Heffan  
Attorney for Applicant  
Testa, Hurwitz & Thibault, LLP  
High Street Tower  
125 High Street  
Boston, MA 02110

# FEE TRANSMITTAL

Note: Effective October 1, 1997.  
Patent fees are subject to annual revision

JUL 13 1998

Com. If Known

Application Serial Number	09/088,621
Filing Date	05/29/98
First Named Inventor	Lara
Group Art Unit	2764
Examiner Name	Not Yet Assigned
Attorney Docket No.	ATV-004

## METHOD OF PAYMENT

- ☒ Payment Enclosed:  
☒ Check ☐ Money Order ☐ Other
- ☒ The Commissioner is hereby authorized to credit or charge any fee indicated below to Deposit Account No. 20-0531.  
☐ Required Fees (copy of this sheet enclosed).  
☒ Additional fee required under 37 CFR 1.16 and 1.17.  
☒ Overpayment Credit.

## FEE CALCULATION

### 1. FILING FEE

#### Large Entity

Fee (\$)	Fee Description	Fee Paid
790	Utility filing fee	
330	Design filing fee	
150	Provisional filing fee	

Number Filed	Number Extra	Rate	Amount
Total Claims	- 20 =	x \$ 22.00 =	

Independent Claims	- 3 =	x \$ 82.00 =	
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☐ Multiple Dependent Claim(s), if any \$270.00 =

TOTAL:

SMALL ENTITY DISCOUNT:

SUBTOTAL (1) (\$)

### 2. AMENDMENT CLAIM FEES

Claims Remaining After Amend.	Highest No. Previously Paid For	Present Extra	Rate	Fee Paid
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Total - = x \$ 22.00 =

Indep. - = x \$ 82.00 =

☐ First Presentation of Multiple Dep. Claim + \$270.00 =

TOTAL: (\$)

SMALL ENTITY DISCOUNT: (\$)

SUBTOTAL (2) (\$)

## FEE CALCULATION (continued)

### 3. ADDITIONAL FEES

Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid
130	65	Surcharge - late filing fee or oath	130.00
50	25	Surcharge - late provisional filing fee or	
130	130	Non-English specification	
2,520	2,520	For filing a request for reexamination	
110	55	Extension for reply within first month	
400	200	Extension for reply within second month	
950	475	Extension for reply within third month	
1,510	755	Extension for reply within fourth month	
2,060	1,030	Extension for reply within fifth month	
310	155	Notice of Appeal	
310	155	Filing a brief in support of an appeal	
270	135	Request for oral hearing	
130	130	Petitions to the Commissioner	
50	50	Petitions related to provisional applications	
240	240	Submission of Information Disclosure Statement (37 CFR 1.97(c))	
130	130	Submission of Information Disclosure Statement (37 CFR 1.97(d))	
790	395	Filing a submission after final rejection (37 CFR 1.129(a))	
790	395	For each additional invention to be examined (37 CFR 1.129(b))	
		Other (Specify)	

SUBTOTAL (3) (\$ 130.00)

SUBTOTAL (1)

SUBTOTAL (2)

SUBTOTAL (3) 130.00

TOTAL (\$ 130.00)

## CORRESPONDENCE ADDRESS

Direct all correspondence to:

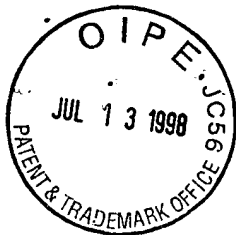
Patent Administrator  
Testa, Hurwitz & Thibault, LLP  
High Street Tower  
125 High Street  
Boston, MA 02110  
Tel. No.: (617) 248-7000  
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Respectfully Submitted,

Ira Heffan  
Attorney for Applicant(s)  
Testa, Hurwitz & Thibault, LLP  
High Street Tower  
125 High Street  
Boston, MA 02110



SECTOR


PATENT  
Attorney Docket No. ATV-004

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S): Lara  
SERIAL NO.: 09/086,821 GROUP NO.: 2764  
FILING DATE: May 29, 1998 EXAMINER:  
TITLE: Web Service

**CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8**

I hereby certify that this correspondence, and any document(s) referred to as enclosed herein, is/are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to the Assistant Commissioner for Patents, Washington, DC 20231 on July 8, 1998.

  
Thomas F. Hellenthal

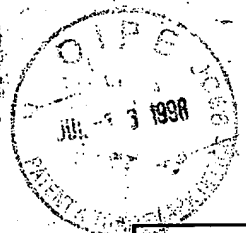
Assistant Commissioner for Patents  
Washington, D.C. 20231

Sir:

Submitted herewith are:

Transmittal Form; Fee Transmittal with Check in the amount of \$130.00;  
Declaration and Power of Attorney for Utility or Design Application; Copy of Notice to  
File Missing Parts of Application (PTO-1553); Postcard.

BEST AVAILABLE COPY



UNITED STATES DEPARTMENT OF COMMERCE  
Patent and Trademark Office  
Address: COMMISSIONER OF PATENTS AND TRADEMARKS  
Washington, D.C. 20231

APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NO./TITLE
09/086,821	05/29/98 LARA	M	ATV-004

0262/0615  
PATENT ADMINISTRATOR  
TESTA HURWITZ AND THIBEAULT  
HIGH STREET TOWER  
125 HIGH STREET  
BOSTON MA 02110

NOT ASSIGNED

2754  
DATE MAILED: 06/15/98

**NOTICE TO FILE MISSING PARTS OF APPLICATION**  
**Filing Date Granted**

An Application Number and Filing Date have been assigned to this application. The items indicated below, however, are missing. Applicant is given TWO MONTHS FROM THE DATE OF THIS NOTICE within which to file all required items and pay fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a). If any of items 1 or 3 through 5 are indicated as missing, the SURCHARGE set forth in 37 CFR 1.16(e) of ☐ \$65.00 for a small entity in compliance with 37 CFR 1.27, or ☒ \$130.00 for a non-small entity, must also be timely submitted in reply to this NOTICE to avoid abandonment.

If all required items on this form are filed within the period set above, the total amount owed by applicant as a ☐ small entity (statement filed) ☒ non-small entity is \$ 130.

- ☐ 1. The statutory basic filing fee is:
  - ☐ missing.
  - ☐ insufficient.Applicant must submit \$ \_\_\_\_\_ to complete the basic filing fee and/or file a small entity statement claiming such status (37 CFR 1.27).
- ☐ 2. Additional claim fees of \$ \_\_\_\_\_, including any multiple dependent claim fees, are required:
  - \$ \_\_\_\_\_ for \_\_\_\_\_ independent claims over 3.
  - \$ \_\_\_\_\_ for \_\_\_\_\_ dependent claims over 20.
  - \$ \_\_\_\_\_ for multiple dependent claim surcharge.Applicant must either submit the additional claim fees or cancel additional claims for which fees are due.
- ☐ 3. The oath or declaration:
  - ☐ is missing or unexecuted.
  - ☐ does not cover the newly submitted items.
  - ☐ does not identify the application to which it applies.
  - ☐ does not include the city and state or foreign country of applicant's residence.An oath or declaration in compliance with 37 CFR 1.63, including residence information and identifying the application by the above Application Number and Filing Date is required.
- ☐ 4. The signature(s) to the oath or declaration is/are by a person other than inventor or person qualified under 37 CFR 1.42, 1.43 or 1.47.  
A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.
- ☒ 5. The signature of the following joint inventor(s) is missing from the oath or declaration:  
Reitz/James, John  
An oath or declaration in compliance with 37 CFR 1.63 listing the names of all inventors and signed by the omitted inventor(s), identifying this application by the above Application Number and Filing Date, is required.
- ☐ 6. A \$50.00 processing fee is required since your check was returned without payment (37 CFR 1.21(m)).
- ☐ 7. Your filing receipt was mailed in error because your check was returned without payment.
- ☐ 8. The application does not comply with the Sequence Rules.  
See attached "Notice to Comply with Sequence Rules 37 CFR 1.821-1.825."
- ☐ 9. OTHER:

Direct the reply and any questions about this notice to "Attention: Box Missing Parts."

**A copy of this notice MUST be returned with the reply.**

Quila Marie Tordella  
Custom r Service Center

07/16/1998 BHT/RES 00000043 09086821 130.00 00  
01 FC:105